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Image# 201603189009791355

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than An A	authorized Committe	e	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typir over the lines.	g, type 12FE4M	5
American Hospital Ass	ociation PAC			1
	800 Tenth Street, NW			
ADDRESS (number and street) ▼		<u> </u>		
Check if different than previously reported. (ACC)	Two CityCenter, Suite 40 Washington		DC	20001-4956
2. FEC IDENTIFICATION NU	IMBER ▼	CITY	STATE ▲	ZIP CODE ▲
C C00106146	3.			MENDED A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:	Mar 20 (M3)	un 20 (M6) Se	g 20 (M8) Nov 20 (M11) (Non-Election Year Only) p 20 (M9) Dec 20 (M12) (Non-Election Year Only) t 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15 Quarterly Report (Q January 31 Year-End Report (Y	2) 12-Day PRE-Election Report for the	Primary (12P Convention (H	(12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	POST-Election Report for the	,	Runoff	(30R) Special (30S) y in the State of
5. Covering Period 02		6 through	02 / 29	2016
I certify that I have examined thi Type or Print Name of Treasurer	•	t of my knowledge and b	elief it is true, correct a	nd complete.
Signature of Treasurer Ms. Ms. M	1elinda Hatton	[Electronically	Filed] Date 03	M / D D / Y D Y Y Y Y Y Y Y 18 2016
NOTE: Submission of false, errone	eous, or incomplete informa	ation may subject the pers	on signing this Report to	the penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

	OF R FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE ECEIPTS AND DISBURSEMENTS	Page 2
٧	Write or Type Committee Name		
	American Hospital Association PAC		
F	Report Covering the Period: From: 02		To: 02 / 29 / 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, (b) Cash on Hand 2016		3140767.55
	(b) Cash on Hand at Beginning of Reporting Period	3114788.22	
	(c) Total Receipts (from Line 19)	170698.96	199968.04
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3285487.18	3340735.59
7.	Total Disbursements (from Line 31)	92646.41	147894.82
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3192840.77	3192840.77
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
>	This committee has qualified as a multicandidate	ate committee. (see FEC FORM 1M)	
	For	further information contact:	
	Fe	ederal Election Commission 999 E Street, NW	

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. (Contributions (other than loans) From:		
(a) Individuals/Persons Other		
	Than Political Committees	61224.00	79311.50
	(i) Itemized (use Schedule A)	0.122.1100	75511.50
	(ii) Unitemized	8626.95	13541.18
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	69850.95	92852.68
,	h) Political Party Committees	0.00	0.00
`	b) Political Party Committees	7	
'	(such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines	7	
	11(a)(iii), (b), and (c)) (Carry	20050.05	97852.68
	Totals to Line 33, page 5)	69850.95	9/002.08
	Transfers From Affiliated/Other Party Committees	100600.00	101600.00
	arty Committees	10000.00	
3. /	All Loans Received	0.00	0.00
4. L	oan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,	
	Refunds, Rebates, etc.)	0.00	0.00
	Carry Totals to Line 37, page 5)	0.00	0.00
	Federal Candidates and Other		
	Political Committees	0.00	0.00
7. (Other Federal Receipts		
	Dividends, Interest, etc.)	248.01	515.36
	ransfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(2, 22 225 (2533 1.0)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Total Receipts (add Lines 11(d),	47000000	400000 04
	2, 13, 14, 15, 16, 17, and 18(c))▶ Total Federal Receipts	170698.96	199968.04
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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: — (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Guioridai Tour to Bato
	(i) Federal Share	0.00	0.00
	· ·		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	306.41	1054.82
	(c) Total Operating Expenditures	7	
	(add 21(a)(i), (a)(ii), and (b))▶	306.41	1054.82
2.	Transfers to Affiliated/Other Party		0.00
3.	Contributions to	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	85000.00	139500.00
4.	Independent Expenditures	7340.00	7340.00
5.	(use Schedule E)	70-10.00	7.540.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
		0.00	
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(1) P ::: 1 P : 0 :::	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
9.	Other Disbursements	0.00	0.00
	L	7	
0.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(1)		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	2.00	200
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	92646.41	147894.82
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	92646.41	147894.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	69850.95	97852.68
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69850.95	97852.68
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	306.41	1054.82
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	306.41	1054.82

FOR LINE NUMBER: PAGE 6 OF 67 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) American Hospital Association PA	С	
Name of Employer O Banner Gateway Medical Center C Receipt For:	State Zip Code AZ 85254-5909 C ccupation hief Executive Officer ggregate Year-to-Date ▼ 350.00	Date of Receipt M M M
Ms. M. Michelle Hood FACHE Mailing Address 43 Whiting Hill Road City Brewer FEC ID number of contributing federal political committee. Name of Employer Eastern Maine Healthcare Systems Property For:	State Zip Code ME 04412-1005 C ccupation esident and Chief Executive Officer ggregate Year-to-Date ▼ 500.00	Date of Receipt 02 03 2016 Transaction ID: 22993384 Amount of Each Receipt this Period 500.00 Memo Item
Name of Employer Wyoming Medical Center Property For:	State Zip Code WY 82601-2926 C ccupation resident and Chief Executive Officer ggregate Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	·····	1350.00
TOTAL This Period (last page this line number only	·)	

FOR LINE NUMBER: PAGE 7 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Michael R Dunaway Date of Receipt Mailing Address 15081 Linden Drive 08 2016 City State Zip Code Transaction ID: 22993453 KS Leawood 66224-3412 Amount of Each Receipt this Period FEC ID number of contributing 375.00 federal political committee. Memo Item Name of Employer Occupation Health Alliance of MidAmerica, The Regional Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Andrew S Davidson Date of Receipt Mailing Address 4000 Kruse Way Place, Suite 2-100 02 02 2016 City State Zip Code Transaction ID: 22993570 Lake Oswego OR 97035-2543 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer Occupation Oregon Association of Hospitals and He President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1500.00 Full Name (Last, First, Middle Initial) c. Mr. Andy Van Pelt Date of Receipt Mailing Address 4000 Kruse Way Place 02 Building 2, Suite 100 02 2016 City State Zip Code Transaction ID: 22993571 OR Lake Oswego 97035-5545 Amount of Each Receipt this Period FEC ID number of contributing С 1000.00 federal political committee. Memo Item Name of Employer Occupation Oregon Association of Hospitals & Heal **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2875.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 8 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Andrea Easton Date of Receipt Mailing Address 258 Evergreen Road 02 2016 City State Zip Code Transaction ID: 22993572 OR Lake Oswego 97034-3145 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Associate VP of Government Affairs & A Oregon Association of Hospitals & Heal Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Peggy Allen Date of Receipt Mailing Address 18839 Roundtree 02 02 2016 City State Zip Code Transaction ID: 22993573 OR Oregon City 97045-3920 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Oregon Association of Hospitals & Heal Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name (Last, First, Middle Initial) c. Ms Kennedy Soileau Date of Receipt Mailing Address 4000 Kruse Way Place 02 Building 2, Suite 100 02 2016 City State Zip Code Transaction ID: 22993574 OR Lake Oswego 97035-5545 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation **Director of Communications** Oregon Association of Hospitals & Heal Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 9 OF 67 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a						
Any information copied from such Reports and Si or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC							
Full Name (Last, First, Middle Initial) Mr. Philip Schmidt Mailing Address 4000 Kruse Way Place Building 2, Suite 100 City Lake Oswego FEC ID number of contributing federal political committee. Name of Employer Oregon Association of Hospitals & Heal Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code OR 97035-5545 C Occupation Associate VP, Public Affairs Aggregate Year-to-Date ▼ 500.00	Date of Receipt 02 02 2016 Transaction ID: 22993575 Amount of Each Receipt this Period 500.00 Memo Item						
Full Name (Last, First, Middle Initial) Ms. Lindell Joseph PhD, RN Mailing Address 200 Hawkins Drive City Iowa City FEC ID number of contributing federal political committee. Name of Employer University of Iowa College of Nursing Receipt For: Primary General Other (specify)	State Zip Code IA 52242-1009 C Occupation Clinical Assistant Professor Aggregate Year-to-Date ▼ 350.00	Date of Receipt 02 09 2016 Transaction ID: 22993889 Amount of Each Receipt this Period 350.00 Memo Item						
Full Name (Last, First, Middle Initial) Dr. Michael Gustafson MD, MBA Mailing Address 1153 Centre Street City Boston FEC ID number of contributing federal political committee. Name of Employer Brigham and Women's Faulkner Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 02130-3446 C Occupation President Aggregate Year-to-Date ▼ 750.00	Date of Receipt 02 05 2016 Transaction ID: 22994441 Amount of Each Receipt this Period 750.00 Memo Item						
SUBTOTAL of Receipts This Page (optional)		1600.00						
TOTAL This Period (last page this line number of	only)							

	F	FOR LINE NUMBER: PAGE 10 OF 67									
Use separate schedule(s)	(0	(check only one)									
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any pedress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr Andrew S Freed Date of Receipt Mailing Address 29 Laurel Street 05 2016 City Zip Code State Transaction ID: 22994442 MA Melrose 02176-4023 Amount of Each Receipt this Period FEC ID number of contributing C 375.00 federal political committee. Memo Item Name of Employer Occupation Director Member Relations and Informat Massachusetts Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Anthony Stanowski Date of Receipt Mailing Address 830 Foxfield Road 02 2016 17 City State Zip Code Transaction ID: 22998588 Lower Gwynedd PA 19002-2081 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Memo Item Name of Employer Occupation Bon Secours Baltimore Health System Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350,00 Full Name (Last, First, Middle Initial) c. Ms. Mary Beth Kingston RN, MSN, N Date of Receipt Mailing Address 3877 Gradyville Road 2016 02 24 City State Zip Code Transaction ID: 23006890 PΑ Newtown Square 19073-3960 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Executive Vice President and Chief Nur Aurora Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1225.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	OR	LINE	NU	MBER	:	PAGE	1	11	OF	67	7
Use separate schedule(s)	(0	che	ck only	or	ıe)							
for each category of the Detailed Summary Page		×	11a		11b		11c		12	_		
., .,			13		14		15		16		1	7

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Ryan K Smith Date of Receipt Mailing Address P O Box 1450 2016 16 City Zip Code State Transaction ID: 23006906 WY Douglas 82633-1450 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Chief Executive Officer Memorial Hospital of Converse County Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Margo Karsten PhD, MSN, Date of Receipt Mailing Address 214 East 23rd Street 02 16 2016 City State Zip Code Transaction ID: 23006907 WY 82001-3748 Cheyenne Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Cheyenne Regional Medical Center Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name (Last, First, Middle Initial) c. Ms. Amy J Hoey RN, BSN, M Date of Receipt Mailing Address 295 Varnum Avenue 2016 02 22 City State Zip Code Transaction ID: 23007231 MA Lowell 01854-2134 Amount of Each Receipt this Period FEC ID number of contributing С 375.00 federal political committee.

					-	-	-	-	_		-
SUBTOTAL of Receipts This Page (optional)	•	L		7			7		1375	.00	╛
										-	п.
TOTAL This Period (last page this line number only)	•	L	_	7	_	_	7	_		-	

375.00

Executive Vice President and Chief Ope

Aggregate Year-to-Date ▼

Occupation

Name of Employer

Primary

Receipt For:

Lowell General Hospital

Other (specify)

General

Memo Item

FOR LINE NUMBER: PAGE 12 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Bruce Bertrand Date of Receipt Mailing Address 1 Stephanie Ann Lane 2016 22 City Zip Code State Transaction ID: 23007232 Sterling MA 01564-2839 Amount of Each Receipt this Period FEC ID number of contributing C 262.50 federal political committee. Memo Item Name of Employer Occupation Chief Medical Officer Heywood Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Winfield S Brown FACHE Date of Receipt Mailing Address 242 Green Street 02 22 2016 City State Zip Code Transaction ID: 23007233 MA Gardner 01440-1336 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Memo Item Name of Employer Occupation Heywood Hospital President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr. Anuj K. Goel Date of Receipt Mailing Address Five New England Executive Park 02 22 2016 City State Zip Code Transaction ID: 23007235 MA Burlington 01803-5010 Amount of Each Receipt this Period FEC ID number of contributing С 262.50 federal political committee. Memo Item Name of Employer Occupation VP of Regulations & Staff Counsel Massachusetts Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) 1275.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Kevin Tabb MD Date of Receipt Mailing Address 330 Brookline Avenue 2016 22 City Zip Code State Transaction ID: 23007238 **Boston** MA 02215-5400 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Memo Item Name of Employer Occupation President and Chief Executive Officer Beth Israel Deaconess Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Patrick R Wardell Date of Receipt Mailing Address 1493 Cambridge Street 02 22 2016 City State Zip Code Transaction ID: 23007239 MA Cambridge 02139-1047 Amount of Each Receipt this Period FEC ID number of contributing 1300.00 federal political committee. Memo Item Name of Employer Occupation Cambridge Health Alliance Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1300.00 Full Name (Last, First, Middle Initial) c. Mr Michael Hachey Date of Receipt Mailing Address 8 Comanche Terrace 02 22 2016 City Zip Code State Transaction ID: 23007240 MA Westford 01886-1290 Amount of Each Receipt this Period FEC ID number of contributing С 262.50 federal political committee. Memo Item Name of Employer Occupation **Emerson Hospital** Senior Vice President, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) 2312.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 14 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Kim Norton Hollon FACHE Date of Receipt Mailing Address 680 Centre Street 2016 22 City Zip Code State Transaction ID: 23007241 **Brockton** MA 02302-3308 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Memo Item Name of Employer Occupation President and Chief Executive Officer Signature Healthcare Brockton Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Edward Kelly Date of Receipt Mailing Address 14 Prospect Street 02 22 2016 City State Zip Code Transaction ID: 23007321 MA Milford 01757-3090 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Memo Item Name of Employer Occupation Milford Regional Medical Center Chief Executive Officer and President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. Mr Karl Kussin Date of Receipt Mailing Address 51 Riverside Avenue 02 22 2016 City Zip Code State Transaction ID: 23007322 MA Concord 01742-3026 Amount of Each Receipt this Period FEC ID number of contributing С 262.50 federal political committee. Memo Item Name of Employer Occupation **Emerson Hospital** V.P., Development Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) 1762.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	FOR LINE NUMBER: PAGE 15 OF 67									
Use separate schedule(s)	(0	che	ck only	or	ıe)						
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any pedress of any political committee							_				i

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial) Ms. Joanne Marqusee Mailing Address P O Box 5001 City Northampton FEC ID number of contributing federal political committee. Name of Employer Cooley Dickinson Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 01061-5001 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 562.50	Date of Receipt 02 22 2016 Transaction ID : 23007323 Amount of Each Receipt this Period 562.50 Memo Item
Full Name (Last, First, Middle Initial) Ms. Christine C Schuster RN, MBA Mailing Address 133 Old Road to Nine Acre Co City Concord FEC ID number of contributing federal political committee. Name of Employer Emerson Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 01742-9120 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 562.50	Date of Receipt 02 22 2016 Transaction ID: 23007324 Amount of Each Receipt this Period 562.50 Memo Item
Full Name (Last, First, Middle Initial) Ms. Laura D. Appel Mailing Address 224 Vicksburg City Lansing FEC ID number of contributing federal political committee. Name of Employer Michigan Health & Hospital Association Receipt For: Primary Other (specify) Other (specify)	State Zip Code MI 48917-9607 C Occupation Vice President, Federal Policy & Advoc Aggregate Year-to-Date ▼ 525.00	Date of Receipt 02
SUBTOTAL of Receipts This Page (optional)	<u>_</u>	1650.00

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association	PAC		
Full Name (Last, First, Middle Initial) Mr. Clark Ballard Mailing Address 1601 Willoughby Road City Mason FEC ID number of contributing federal political committee.	State MI	Zip Code 48854-9435	Date of Receipt 02 23 2016 Transaction ID: 23007348 Amount of Each Receipt this Period 525.00
Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice Aggregate		Memo Item
Full Name (Last, First, Middle Initial) Mr. Robert F Casalou Mailing Address 620 Byron Road City Howell FEC ID number of contributing federal political committee. Name of Employer St. Joseph Mercy Livingston Hospital Receipt For:		Zip Code 48843-1002 Ind Chief Executive Officer Year-to-Date ▼	Date of Receipt 02 23 2016 Transaction ID: 23007349 Amount of Each Receipt this Period 875.00 Memo Item
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Mr Anthony Denton Mailing Address 1601 Newport Creek Drive City Ann Arbor FEC ID number of contributing federal political committee. Name of Employer University of Michigan Hospitals and H Receipt For: Primary General Other (specify) ▼	State MI C Occupation Executive D	Zip Code 48103-2206	Date of Receipt 02 23 2016 Transaction ID: 23007350 Amount of Each Receipt this Period 350.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		·····	1750.00
TOTAL This Period (last page this line number	only)		

FOR LINE NUMBER: PAGE 17 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David S. Finkbeiner Date of Receipt Mailing Address 85 Damon Road 2016 23 City Zip Code State Transaction ID: 23007351 Haslett MI 48840-9747 Amount of Each Receipt this Period FEC ID number of contributing 700.00 federal political committee. Memo Item Name of Employer Occupation Michigan Health & Hospital Association Senior Vice President, Advocacy Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John T Fox Date of Receipt Mailing Address 3711 West 13 Mile Road 02 23 2016 City State Zip Code Transaction ID: 23007352 Royal Oak MI 48073-6767 Amount of Each Receipt this Period FEC ID number of contributing 525.00 federal political committee. Memo Item Name of Employer Occupation Beaumont Health President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 525,00 Full Name (Last, First, Middle Initial) c. Ms. Christina Freese-Decker Date of Receipt Mailing Address 5562 Highbury Drive SE 02 23 2016 City State Zip Code Transaction ID: 23007353 MI Ada 49301-7738 Amount of Each Receipt this Period FEC ID number of contributing С 525.00 federal political committee. Memo Item Name of Employer Occupation Spectrum Health President, Spectrum Health Hospital Gr Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 18 OF 67 Use separate schedule(s) for each category of the (check only one)

	EWIZED RECEIPTS		Detailed Summary Page	X	11a 13		11b		11c		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the i				r the		oose		oliciting		ntributi	ions			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Hospital Association P	AC													
Α.	Full Name (Last, First, Middle Initial) Mr. David B Jahn			D	ate of	Re	ceip	ot							
	Mailing Address 500 Osborn Boulevard				M = M 02	′	D	23	/ Y		016	Y			
	City	State	Zip Code		Trans	acti	ion l	ID : 23	300735	4					
	Sault Sainte Marie	MI	49783-1822	A	mount	of	Eac	h Rec	eipt th	is F	eriod				
	FEC ID number of contributing federal political committee.	С					7		7	_	350.0	0			
	Name of Employer	Occupation		_ L	Mer	no It	tem								
	War Memorial Hospital	President a	nd Chief Executive Officer												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		350.00												
В.	Full Name (Last, First, Middle Initial) Mr. Timothy Johnson			D	ate of	Re	ceip	ot							
	Mailing Address P O Box 130				M = M 02	′	D	23	/ Y		016	Y			
	City	State Zip Code								5					
	Eaton Rapids	MI	48827-0130	A	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	ÿ								262.50					
	Name of Employer Eaton Rapids Medical Center	Occupation President a	nd Chief Executive Officer	L	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 262.50												
С.	Full Name (Last, First, Middle Initial) Dr. Paul E LaCasse DO, MPH			D	ate of	Re	ceip	ot							
	Mailing Address 28050 Grand River Avenue				M - M 02	′	D	23	/ Y)16	Y			
	City Farmington Hills	State MI	Zip Code 48336-5919						300735 ceipt th		eriod				
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 525.00							0				
	Name of Employer	Occupation		- L	Mer	mo It	tem	l							
	Beaumont Hospital - Farmington Hills	President a	nd Chief Executive Officer												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00												
s	UBTOTAL of Receipts This Page (optional)			. [_		1		-		1137.5	0			
Т	OTAL This Period (last page this line number or	nly)					7								

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not be sold or used by any pedress of any political committee						_				S

		atements may not be sold or used by any perso name and address of any political committee to	
\	nerican Hospital Association P	PAC	
A. Ms	Name (Last, First, Middle Initial) . Marilyn Litka-Klein ing Address 16930 Pine Hollow Drive		Date of Receipt
	Todoo I mo Honov Brive		02 23 2016
City		State Zip Code	Transaction ID: 23007358
Eas	t Lansing	MI 48823-9664	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	350.00
Nam	e of Employer	Occupation	Memo Item
	nigan Health & Hospital Association	Sr. Director, Health Finance	
Rece	eipt For: Primary	Aggregate Year-to-Date ▼ 350.00	
B. Ms	Name (Last, First, Middle Initial) Gwen Mackenzie		Date of Receipt
Maili	ing Address 5380 Woodland Estates Drive S	South	M = M / D = D / Y = Y = Y = Y
City		State Zip Code	02 23 2016
•	omfield Hills	MI 48302-2875	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	525.00
	e of Employer	Occupation	Memo Item
	ohn Providence Health System	Senior Vice President	
Rece	eipt For: Primary	Aggregate Year-to-Date ▼ 525.00	
	Name (Last, First, Middle Initial) Chris J. Mitchell		Date of Descript
	ing Address 1262 Lake Side Drive		Date of Receipt 02 23 _ 2016 _
City		State Zip Code	Transaction ID: 23007360
Eas	t Lansing	MI 48823-2427	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C	700.00
Nam	e of Employer	Occupation	Memo Item
	nigan Health & Hospital Association	Manager, Government Relations	
Rece	eipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	700.00	
SUBT	OTAL of Receipts This Page (optional)		1575.00
TOTAI	L This Period (last page this line number o	nly)	

FOR LINE NUMBER: PAGE 20 OF 67 Use separate schedule(s) for each category of the (check only one)

TEWIZED RECEIPTS		Detailed Summary Page	X	11a 13		11b		11c	12		17				
Any information copied from such Reports and Stat or for commercial purposes, other than using the n				for the		oose (oliciting	contrib						
NAME OF COMMITTEE (In Full) American Hospital Association PA	AC														
Full Name (Last, First, Middle Initial) A. Mr. Brian Peters				Date of	Re	ceipt									
Mailing Address 3051 Crofton Dr.				м = м 02	/	2		/ Y	2016	Y					
City	State	Zip Code		Trans	acti	on ID	: 23	300736	1						
Dewitt	MI	48820-7770	_ '	Amount	of	Each	Red	eipt th	is Perio	d					
FEC ID number of contributing federal political committee.	С					,		7	700	0.00					
Name of Employer	Occupation			Mer	no It	tem									
9	Chief Execu	utive Officer													
	Aggregate	Year-to-Date ▼													
Primary General Other (specify) ▼		700.00													
Full Name (Last, First, Middle Initial) 3. Dr. Diane Postler-Slattery PhD				Date of	Re	ceipt									
Mailing Address 4000 Wellness Drive				M M M	/	2	3	/ Y	2016	Y					
City	State	Zip Code		Trans	acti	on ID	: 23	00736	2						
Midland	idland MI 48670-2000									d					
FEC ID number of contributing federal political committee.	ÿ								525.00						
MidMichigan Haalth	Occupation President ar	nd Chief Executive Officer		Mei	mo l	tem									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00													
Full Name (Last, First, Middle Initial) C. Mr. Robert G Riney				Date of	Re	ceipt									
Mailing Address 125 Kenwood				M M M	′		23	/ Y	2016	Y					
City Grosse Pointe Farms	State MI	Zip Code 48236-3608						300736 ceipt th	is Perio	d					
FEC ID number of contributing federal political committee.	С		525.00					5.00							
Name of Employer	Occupation			Mer	Memo Item										
,	President a	nd Chief Operating Officer													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00													
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TOTAL This Period (last page this line number on		·	-								Ī				

FOR LINE NUMBER: PAGE 21 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. David Seaman Date of Receipt Mailing Address 805 Ledge Moor Blvd. 2016 23 City Zip Code State Transaction ID: 23007364 Grand Ledge MI 48837-2037 Amount of Each Receipt this Period FEC ID number of contributing 700.00 federal political committee. Memo Item Name of Employer Occupation **Executive Vice President** Michigan Health & Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Ronald J Cork Date of Receipt Mailing Address 619 E Mayo St 02 22 2016 City State Zip Code Transaction ID: 23007494 NE O' Neill 68763-1151 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Avera St. Anthony's Hospital President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Mr. Harold L Krueger Jr Date of Receipt Mailing Address 525 Main St 2016 02 22 City Zip Code State Transaction ID: 23007498 NF Chadron 69337-9400 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation Chief Executive Officer Chadron Community Hospital and Health Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one)

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	y information copied from such Reports and Sta for commercial purposes, other than using the r			
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association P.	AC		
۸.	Receipt For: Primary General Other (specify) ▼	State NE C Occupation Chief Execu		Date of Receipt M M M
3.	Full Name (Last, First, Middle Initial) Ms. Leslie Marsh ACHE Mailing Address P O Box 980 City Lexington FEC ID number of contributing federal political committee. Name of Employer Lexington Regional Health Center Receipt For: Primary General Other (specify)	State NE C Occupation Chief Execu		Date of Receipt M M M
D .	Full Name (Last, First, Middle Initial) Ms. Laura J Redoutey FACHE Mailing Address 56640 716 Rd City Fairbury FEC ID number of contributing federal political committee. Name of Employer Nebraska Hospital Association Receipt For: Primary General Other (specify)	State NE C Occupation President Aggregate	Zip Code 68352-4044 Year-to-Date ▼	Date of Receipt M
S	UBTOTAL of Receipts This Page (optional)		····	1000.00
т	OTAL This Period (last page this line number or	nlv)		

FOR LINE NUMBER: PAGE 23 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Douglas A Struyk CPA, LNHA Date of Receipt Mailing Address 14 Benson Drive 2016 19 City Zip Code State Transaction ID: 23007769 Wayne NJ 07470-3923 Amount of Each Receipt this Period FEC ID number of contributing 975.00 federal political committee. Memo Item Name of Employer Occupation President and Chief Executive Officer Christian Health Care Center Receipt For: Aggregate Year-to-Date ▼ Primary General 975.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Karen Ali Date of Receipt Mailing Address 15 Sherbrook Drive 02 26 2016 City State Zip Code Transaction ID: 23007858 NJ Princeton 08550-1229 Amount of Each Receipt this Period FEC ID number of contributing 299.00 federal political committee. Memo Item Name of Employer Occupation New Jersey Hospital Association General Counsel, Legal Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 325,00 Full Name (Last, First, Middle Initial) c. Mr. John A DiAngelo Date of Receipt Mailing Address 105 Pancoast Place 2016 02 26 City Zip Code State Transaction ID: 23007860 NJ Mullica Hill 08062-4735 Amount of Each Receipt this Period FEC ID number of contributing С 975.00 federal political committee. Memo Item Name of Employer Occupation Inspira Health Network President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 975.00 Other (specify) 2249.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) (check only one)

_	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and State for commercial purposes, other than using the n		
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association Pa	AC	
Δ.	New Jersey Hospital Association Receipt For: Primary Other (specify)	State Zip Code NJ 08505-4439 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1625.00	Date of Receipt 26 2016 Transaction ID: 23007863 Amount of Each Receipt this Period 1625.00 Memo Item
3.	Cincinnati Children's Hospital Medical	State Zip Code OH 45229-3026 C Occupation Senior Vice President, Patient Service Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M
٥.	Okeene Municipal Hospital	State Zip Code OK 73763-0489 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt Mark
	SUBTOTAL of Receipts This Page (optional)		2875.00
Т	OTAL This Period (last page this line number on	nlv)	

	FOR LINE NUMBER: PAGE 25 OF 6									
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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Michele Ryder MS-HSA, RN Date of Receipt Mailing Address 7720 SW 183 Terrace 25 2016 City State Zip Code Transaction ID: 23016711 FL Palmetto Bay 33157-6233 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation AVP Baptist Hospital of Miami Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. William M Duquette Date of Receipt Mailing Address 975 Baptist Way 02 25 2016 City State Zip Code Transaction ID: 23016713 Homestead FL 33033-7600 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Homestead Hospital Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jason H Moore Date of Receipt Mailing Address 2112 Doral Drive 2016 02 25 City State Zip Code Transaction ID: 23016719 FL Tallahassee 32312-3159 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President and Chief Operating Off Tallahassee Memorial HealthCare Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association P	PAC	
Full Name (Last, First, Middle Initial) Ms. Margie Atkinson Mailing Address 3098 Robinwood Lane City Palm Harbor FEC ID number of contributing federal political committee. Name of Employer Morton Plant Mease Health Care Receipt For: Primary Other (specify)	State Zip Code FL 34684-1656 C Occupation Director, Pastoral, Ethics, Pallative Aggregate Year-to-Date ▼ 250.00	Date of Receipt 02
Full Name (Last, First, Middle Initial) Mr. Douglas Rothermel CHESP Mailing Address 3001 West Dr. Martin Luther Kir City Tampa FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify)	ng J State Zip Code FL 33607-6307 C Occupation Director of Environmental Services Aggregate Year-to-Date ▼ 250.00	Date of Receipt 02 25 2016 Transaction ID: 23016734 Amount of Each Receipt this Period 250.00 Memo Item
Full Name (Last, First, Middle Initial) Mr. Clint Shouppe Mailing Address 45 Davis Blvd #10 City Tampa FEC ID number of contributing federal political committee. Name of Employer Winter Haven Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33606-3459 C Occupation Manager Government Relations Aggregate Year-to-Date ▼ 250.00	Date of Receipt 02
SUBTOTAL of Receipts This Page (optional)		750.00

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for each category of the Detailed Summary Page	X	11a		11b		11c		12	
		13		14		15		16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Kyle J Barr Date of Receipt Mailing Address 2985 Drew St 25 2016 City State Zip Code Transaction ID: 23016738 FL Clearwater 33759-3012 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Vice President Team Resources BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr Kevin Corrigan Date of Receipt Mailing Address 2948 Hillcreek Circle So 02 25 2016 City State Zip Code Transaction ID: 23021059 FL Clearwater 33759-1210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Morton Plant Mease Health Care Chief Operations Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Ms Janice East Date of Receipt Mailing Address 2021 Long Branch Lane 2016 02 25 City State Zip Code Transaction ID: 23021060 FL Clearwater 33760-1960 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Morton Plant Mease Health Care Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 28 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Karen Kerr RN Date of Receipt Mailing Address 3103 Thackery Ct 2016 25 City State Zip Code Transaction ID: 23021061 FL Plant City 33566-9540 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation President and Chief Executive Officer South Florida Baptist Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Daniel Sweeney Date of Receipt Mailing Address 1706 Huntington Court 02 25 2016 City State Zip Code Transaction ID: 23021062 FL Safety Harbor 34695-5635 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Ms. Anne Condor Date of Receipt Mailing Address 2152 W Vina Del Mar 02 25 2016 City State Zip Code Transaction ID: 23021066 FL St Pete Beach 33706-2842 Amount of Each Receipt this Period FEC ID number of contributing С 250.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Director Managed Care Decision Support Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 29 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Eli Freilich Date of Receipt Mailing Address 1675 Coachmakers Lane 2016 25 City State Zip Code Transaction ID: 23042075 FL Clearwater 33765-1735 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Director, Clinical Performance Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr Lee Kirkman Date of Receipt Mailing Address 3952 Versailles Dr 02 25 2016 City State Zip Code Transaction ID: 23042076 FL Tampa 33634-7425 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Ms Cynthia Jones Date of Receipt Mailing Address 2920 Sanctuary Circle 02 25 2016 City State Zip Code Transaction ID: 23042078 FL Lakeland 33803-5482 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Vice President, Applications Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s) (check only one)

- F	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and State for commercial purposes, other than using the n		
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association Pa	AC	
Δ.	BayCare Health System Receipt For: Primary Other (specify)	State Zip Code FL 33701-3065 C Occupation Board of Trustees Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M
3.	Morton Plant Hospital	State Zip Code FL 34695-5636 C Occupation President Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M
D .	Morton Plant Mease Health Care	State Zip Code FL 33556-3223 C Occupation Vice President and Chief Information O Aggregate Year-to-Date ▼ 500.00	Date of Receipt M
S	SUBTOTAL of Receipts This Page (optional)		1250.00
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FOR LINE NUMBER: PAGE 31 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Scott Kizer Date of Receipt Mailing Address 5340 W Kennedy Blvd Unit 609 2016 25 City State Zip Code Transaction ID: 23042084 FL Tampa 33609-2452 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President Legal Services Morton Plant Mease Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms Delphine Ballard Date of Receipt Mailing Address 10414 Butia PI 02 25 2016 City State Zip Code Transaction ID: 23042085 FL Tampa 33618-4118 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital Director Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) **c.** Mr Dewey Mitchell Date of Receipt Mailing Address 8600 State Rd 54 2016 02 25 City State Zip Code Transaction ID: 23042087 FL **New Port Richey** 34655-3003 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation **Board of Trustees** BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15	-	6		17
not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Timothy W Cook Date of Receipt Mailing Address 701 West Plymouth Avenue 25 2016 City State Zip Code Transaction ID: 23042088 FL 32720-3236 Deland Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation President and CEO Florida Hospital DeLand Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Lisa Johnson RN, MSN, N Date of Receipt Mailing Address P O Box 210 02 2016 25 City State Zip Code Transaction ID: 23044953 FL Clearwater 33757-0210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Morton Plant Mease Health Care Chief Nursing Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name (Last, First, Middle Initial)

c. Mr Jeffrey Held Date of Receipt Mailing Address 1880 Sharpe Lane 2016 02 25 City State Zip Code Transaction ID: 23044954 FL Dunedin 34698-9238 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President Physcian Srvcs BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

	F	FOR LINE NUMBER: PAGE 33 OF								(67	
Use separate schedule(s) for each category of the	(c	(check only one)										
Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16			17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. James S Bacon Date of Receipt Mailing Address BayCare Health System 25 2016 City State Zip Code Transaction ID: 23044955 FL Clearwater 33759 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation **Director Team Resources** St. Anthony's Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr Thomas Garthwaite Date of Receipt Mailing Address 1124 Nature View Circle 02 25 2016 City State Zip Code Transaction ID: 23044956 Port Orange FL 32128-7453 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Ms Sheila Johnson Date of Receipt Mailing Address 4824 Tea Rose Court 2016 02 25 City State Zip Code Transaction ID: 23044958 FL Lutz 33558-9005 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Children's Hospital of Ta Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) American Hospital Association PA	AC		
Δ.	Name of Employer St. Anthony's Rehabilitation Hospital Receipt For: Primary General Other (specify) ▼	State FL C Decupation Vice President Aggregate Ye	Zip Code 33701-1121 t Medical Affairs ear-to-Date ▼ 500.00	Date of Receipt 02 25 2016 Transaction ID: 23044959 Amount of Each Receipt this Period 500.00 Memo Item
3.	Name of Employer BayCare Health System Perceint For:	State FL C Description George President Aggregate Ye	· · · · · · · · · · · · · · · · · · ·	Date of Receipt 02
ο.	Name of Employer St. Anthony's Hospital Descript For:	State FL C Description Director Aggregate Ye	Zip Code 34677-4824 ear-to-Date ▼	Date of Receipt M
S	UBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·	1250.00
т	OTAL This Period (last page this line number only	v)		

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for each category of the Detailed Summary Page	×	1 1a		11b		11c		12			
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not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr Charles McPherson Date of Receipt Mailing Address 309 Quails Run Pass 25 2016 City State Zip Code Transaction ID: 23044969 FL Winter Haven 33884-4144 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Board of Trustees** Winter Haven Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Cindy Righter Date of Receipt Mailing Address 5016 Bridgeport Drive 02 25 2016 City State Zip Code Transaction ID: 23044970 Safety Harbor FL 34695-4959 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Morton Plant North Bay Hospital Director, Quality and Hospital Divisio Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) C.

Full Name (Last, First, Middle Initial) Mr Bruce Flareau		Date of Receipt
Mailing Address 5847 Long Bayou Way South		02 25 2016
City	State Zip Code	Transaction ID: 23044973
Saint Petersburg	FL 33708-3550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Memo Item
Morton Plant Hospital	Executive Vice President, Physician Sv	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	1000.00	

FOR LINE NUMBER: PAGE 36 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms Melissa Myrick Date of Receipt Mailing Address 637 Pinellas Bayway Unit #110 2016 25 City State Zip Code Transaction ID: 23044976 FL Tierra Verde 33715-1958 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Director, Health Information Mnmgt BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Ronald J Colaguori Date of Receipt Mailing Address 1200 Seventh Avenue North 02 25 2016 City State Zip Code Transaction ID: 23044978 FL Saint Petersburg 33705-1300 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation St. Anthony's Hospital Vice President Operations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Ms. Janice Polo Date of Receipt Mailing Address 4604 Vasconia St 02 25 2016 City State Zip Code Transaction ID: 23044979 FL Tampa 33629-8330 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	F	FOR LINE NUMBER: PAGE 37 OF								67		
Use separate schedule(s) for each category of the	(check only one)											
Detailed Summary Page		X	11a		11b		11c		12			
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not be sold or used by any pe	rso	n fo	or the i	our	ose o	f so	licitina	CO	ntrik	outio	ns	

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Diane M. Kazmierski Date of Receipt Mailing Address 4736 Royal Palm Circle, NE 25 2016 City State Zip Code Transaction ID: 23044980 FL Saint Petersburg 33703-3138 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President, Managed Care BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Paula McGuiness Date of Receipt Mailing Address 14655 Village Glen Circle 02 25 2016 City State Zip Code Transaction ID: 23044982 FL Tampa 33618-2733 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name (Last, First, Middle Initial) c. Mr. Lou Galdieri RN, BSN Date of Receipt Mailing Address P O Box 760 2016 02 25 City Zip Code State Transaction ID: 23044986 FL Dunedin 34697-0760 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer Occupation

Other (specify) ▼	500.00									
SUBTOTAL of Receipts This Page (optional)	>	Ξ	Ξ	7		7	Ξ	1500	.00	
TOTAL This Period (last page this line number	only)	_		7	_	7				

President

Aggregate Year-to-Date ▼

Mease Countryside Hospital

General

Receipt For:

Primary

FOR LINE NUMBER: PAGE 38 OF Use separate schedule(s) (check only one)

[F	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ry information copied from such Reports and Sta for commercial purposes, other than using the r			
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association P.	AC		
Δ.	Receipt For: Primary General Other (specify) ▼	State FL C Occupation Chief Opera Aggregate	Zip Code 33647-2279 Itions Officer Year-to-Date ▼ 1000.00	Date of Receipt M
3.	Full Name (Last, First, Middle Initial) Ms. Keri Eisenbeis Mailing Address 163 Barbados Ave City Tampa FEC ID number of contributing federal political committee. Name of Employer Morton Plant Mease Health Care Receipt For: Primary General Other (specify)		Zip Code 33606-3502 vernment Relations Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3 .	Full Name (Last, First, Middle Initial) Mr. Robert Costello Mailing Address 601 Main Street City Dunedin FEC ID number of contributing federal political committee. Name of Employer Mease Dunedin Hospital Receipt For: Primary Other (specify) Other (specify)		Zip Code 34698-5848 ategic Planning Year-to-Date ▼ 250.00	Date of Receipt M
S	SUBTOTAL of Receipts This Page (optional)			1500.00
Т	OTAL This Period (last page this line number or	nlv)		

FOR LINE NUMBER: PAGE 39 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms JoLinda Schrag Date of Receipt Mailing Address 231 39th Ave NE 2016 25 City State Zip Code Transaction ID: 23044991 FL Saint Petersburg 33703-5835 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Director of Central Intake BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms Arlene McGannon Date of Receipt Mailing Address 2011 Hawkhurst Circle 02 25 2016 City State Zip Code Transaction ID: 23045003 Sun City Center FL 33573-7303 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Mr Tom L Davis Date of Receipt Mailing Address 12913 Red Cardinal 02 25 2016 City State Zip Code Transaction ID: 23045004 FL Odessa 33556-5434 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation **Director Facilities Management** BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 40 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. John Gantner Date of Receipt Mailing Address 690 Island Way Unit 404 2016 25 City State Zip Code Transaction ID: 23045005 FL Clearwater 33767-1926 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation Chief Financial Officer BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms Bianca Lenglet Date of Receipt Mailing Address 638 3rd St. N 02 25 2016 City State Zip Code Transaction ID: 23045006 FL Saint Petersburg 33701-2410 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer Occupation BayCare Health System Director, Patient Experience Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Dr. Mark Vaaler MD Date of Receipt Mailing Address P O Box 4227 2016 02 25 City Zip Code State Transaction ID: 23045007 FL Tampa 33677-4227 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital Vice President Medical Staff Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 41 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using		person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC	
Full Name (Last, First, Middle Initial) Mr. Stephen R Mason Mailing Address 16255 Bay Vista Dr City Clearwater FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Receipt For: Primary General Other (specify)	State Zip Code FL 33760-3127 C Occupation President & CEO Aggregate Year-to-Date ▼ 1000.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr Mahesh Amin Mailing Address 1802 Nottingham Lane City Clearwater FEC ID number of contributing federal political committee. Name of Employer BayCare Health System Receipt For: Primary General Other (specify)	State Zip Code FL 33764-6411 C Occupation Trustee Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Mr. Jimmy Baumgartner Mailing Address 2538 West Palm Drive City Tampa FEC ID number of contributing federal political committee. Name of Employer St. Joseph's Hospital Receipt For: Primary General Other (specify)	State Zip Code FL 33629-7314 C Occupation Director-Research Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M 25 2016 Transaction ID : 23045019 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional))	1750.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 42 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Thomas P. Inzina Date of Receipt Mailing Address 405 Buttonwood Lane 2016 25 City State Zip Code Transaction ID: 23045020 FL Largo 33770-4060 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer Occupation Vice President, Finance BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr Robert Carter Date of Receipt Mailing Address 1312 Mirror Ter. NW 02 25 2016 City State Zip Code Transaction ID: 23045021 FL Winter Haven 33881-2350 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Winter Haven Hospital Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) **c.** Mr. Mark Bostick Date of Receipt Mailing Address PO Drawer 67 02 25 2016 City State Zip Code Transaction ID: 23045022 FL Auburndale 33823-0067 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer Occupation Chairman, Board of Trustees BayCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 43 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Patricia Donnelly RN, MSN Date of Receipt Mailing Address 2858 Gloria Ct. 2016 25 City State Zip Code Transaction ID: 23045024 FL Clearwater 33761-3825 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation Chief Nurse Executive St. Joseph's Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Lorraine Lutton Date of Receipt Mailing Address P O Box 4227 02 25 2016 City State Zip Code Transaction ID: 23045025 FL Tampa 33677-4227 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer Occupation St. Joseph's Hospital President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Ms. Patricia Sizemore RN, MA Date of Receipt Mailing Address 940 Hemingway Circle 02 25 2016 City State Zip Code Transaction ID: 23045026 FL Tampa 33602-5980 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation Vice President Patient Care Services St. Anthony's Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 44 OF 67 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Deeb Salem Date of Receipt Mailing Address 800 Washington Street 2016 26 City Zip Code State Transaction ID: 23045103 **Boston** MA 02111-1552 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Memo Item Name of Employer Occupation Interim President & Chief Med Off **Tufts Medical Center** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Eric Stastny Date of Receipt Mailing Address 67 Scott Rd 02 26 2016 City State Zip Code Transaction ID: 23045105 MA **Belmont** 02478-3343 Amount of Each Receipt this Period FEC ID number of contributing 262.50 federal political committee. Memo Item Name of Employer Occupation **Emerson Hospital** Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 262.50 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1012.50 SUBTOTAL of Receipts This Page (optional)..... 61224.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 OF 67 (check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c X 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) American Hospital Association	PAC					
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Ass Mailing Address One Empire Drive City Rensselaer FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State NY C Coo	Zip Code 12144 0160259	Date of Receipt M			
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Fe Mailing Address 5510 Research Park Drive PO Box 259038 City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) General Other (specify)	State WI C Coo	Zip Code 53725-9038 0422881 Year-to-Date ▼	Date of Receipt 02 29 2016 Transaction ID: 23026192 Amount of Each Receipt this Period 500.00 Memo Item			
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association For Mailing Address 5510 Research Park Drive PO Box 259038 City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State WI C CO	Zip Code 53725-9038 0422881	Date of Receipt 02 29 2016 Transaction ID: 23027127 Amount of Each Receipt this Period 100.00 Memo Item			
SUBTOTAL of Receipts This Page (optional)			100600.00			
TOTAL This Period (last page this line numbe	r only)		100600.00			

S	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 46 OF 67					
ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
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_				13 14 15 16 X 17					
Ar or	ny information copied from such Reports and Star for commercial purposes, other than using the n	tements ma	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
\setminus	NAME OF COMMITTEE (In Full)								
	American Hospital Association Pa	AC							
Α.	Full Name (Last, First, Middle Initial) TD Bank			Date of Receipt					
	Mailing Address 901 Seventh Street, NW			02 29 2016					
	City	State	Zip Code	Transaction ID: 23045795					
	Washington	DC	20001	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		248.01					
	Name of Employer	Occupation		Memo Item					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	Interest Earned					
	Other (specify) ▼		515.36						
— В.	Full Name (Last, First, Middle Initial)			Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer	Occupation		Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	Aggregate	Teal-to-Date ¥	1					
	Other (specify) ▼								
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer	Occupation		Memo Item					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)		7						
S	UBTOTAL of Receipts This Page (optional)			248.01					

TOTAL This Period (last page this line number only).....

248.01

TEMIZED DISBURSEMENTS	Use separate schedule(s) (check for each category of the	INE NUMBER: PAGE 47 OF 67 only one) 21b 22 23 24 25 26
	Detailed Summary Page	27 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-		
NAME OF COMMITTEE (In Full) American Hospital Association PAC	•	
Full Name (Last, First, Middle Initial) Newtek Merchant Solutions		Date of Disbursement
Mailing Address 744 N 4th Street		02 01 2016
Milwaukee	tate Zip Code WI 53203	Transaction ID: 23045816
Purpose of Disbursement Merchant Fees Candidate Name	001	Amount of Each Disbursement this Period
Office Sought: House Disbursem	Category Type ent For:	0.27
	Primary General Other (specify) ▼	Merchant Fees
Full Name (Last, First, Middle Initial) Newtek Merchant Solutions		Date of Disbursement
Mailing Address 744 N 4th Street		02 02 / 2016
,	tate Zip Code WI 53203	Transaction ID: 23045818
Merchant Fees Candidate Name	001 Category	Amount of Each Disbursement this Period
	ent For: Primary General Other (specify)	Memo Item Merchant Fees
Full Name (Last, First, Middle Initial) TD Bank		Date of Disbursement
Mailing Address 901 Seventh Street, NW		02 16 2016
•	tate Zip Code DC 20001	Transaction ID : 23045825
Bank Fee		7
Candidate Name	001 Category	Amount of Each Disbursement this Period 106.26
Candidate Name Office Sought: House Disbursem Senate	Category Type	
Candidate Name Office Sought: House Disbursem Senate President	Category Type ent For: Primary General Other (specify) ▼	106.26 Memo Item Bank Fee

SCHEDULE B (FEC Form 3X)	Use separate schedule	e(s) FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ne (official offin)	22 X 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statemor for commercial purposes, other than using the name	ents may not be sold of	r used by any personalitical committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		<u> </u>	
Full Name (Last, First, Middle Initial)			
A. Donovan For Congress			Date of Disbursement
Mailing Address 440 Leverett Avenue			02 02 2016
Staten Island	tate Zip Code NY 10308		Transaction ID: 22993187
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Daniel M. Donovan Jr.		Category/ Type	1000.00
Senate President	ent For: 2016 Primary ☐ Genera Other (specify) ▼	al	Memo Item Contribution
State: NY District: 11 Full Name (Last, First, Middle Initial) Gene Green Congressional Campa Mailing Address PO Box 16128	iign		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	tate Zip Code TX 77222		Transaction ID: 22993188
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Gene Green		Category/ Type	2500.00
Office Sought: House Disbursem	ent For: 2016 Primary Genera Other (specify)		Memo Item Contribution
Full Name (Last, First, Middle Initial) PETEPAC: People for Enterprise Ti	rade & Econ Gro	wth	Date of Disbursement
Mailing Address 3686 King Street #146			02 02 2016
Alexandria	tate Zip Code VA 22302		Transaction ID: 22993189
Purpose of Disbursement 2016 Contribution		011	Amount of Each Disbursement this Period
Candidate Name PETEPAC: People for Enterprise Trace	de & Econ Growth	Category/ Type	5000.00
Office Sought: House Disbursem Senate F	ent For: Primary Genera Other (specify)	al	Memo Item 2016 Contribution
State: President C	Other (specify)		

TEMIZED DISBURSEMENTS	Llos concrete cohodulo(s)	OR LINE NUMBER: PAGE 49 OF 67 heck only one) 21b 22 23 24 25 26
Any information copied from such Reports and Statem	ents may not be sold or used by	
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American Hospital Association PAC	e and address of any political cor	
Full Name (Last, First, Middle Initial) A. Collins For Congress Mailing Address PO Box 386		Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
,	tate Zip Code NY 14031	Transaction ID : 22993190
Senate President State: NY District: 27	Cat	Amount of Each Disbursement this Period egory/ ype Memo Item Contribution
Full Name (Last, First, Middle Initial) Ted Lieu For Congress Mailing Address 6380 Wilshire Blvd #1612		Date of Disbursement O2 O4 2016
Los Angeles	tate Zip Code CA 90048	Transaction ID : 22993191
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Contribution Candidate Name Ted Lieu Office Sought: House Senate Disbursem	Cat	Amount of Each Disbursement this Period eggory/ ype Memo Item Contribution
Contribution Candidate Name Ted Lieu Office Sought: House Senate President Disbursem	ent For: 2016 Primary General	egory/ ype 1000.00 Memo Item
Contribution Candidate Name Ted Lieu Office Sought: Senate President State: CA District: 33 Full Name (Last, First, Middle Initial) People For Derek Kilmer Mailing Address PO Box 1381 City Sacoma Purpose of Disbursement Contribution Candidate Name Rep. Derek Kilmer Disbursement Office Sought: House Disbursement Disbursemen	ent For: 2016 Primary General Other (specify) tate Zip Code NA 98402 Cat T ent For: 2016	egory/ ype Memo Item Contribution Date of Disbursement
Contribution Candidate Name Ted Lieu Office Sought: Senate President State: CA District: 33 Full Name (Last, First, Middle Initial) People For Derek Kilmer Mailing Address PO Box 1381 City Tacoma Purpose of Disbursement Contribution Candidate Name Rep. Derek Kilmer Office Sought: House Senate Disbursement	ent For: 2016 Primary General Other (specify) tate Zip Code NA 98402	Date of Disbursement Date of Disbursement O2
Contribution Candidate Name Ted Lieu Office Sought: Senate President State: CA District: 33 Full Name (Last, First, Middle Initial) People For Derek Kilmer Mailing Address PO Box 1381 City Tacoma Purpose of Disbursement Contribution Candidate Name Rep. Derek Kilmer Office Sought: House Senate President Disbursement Coffice Sought: House Senate President	ent For: 2016 Primary General Other (specify) tate Zip Code NA 98402 Cat T Cat T General Other (specify) Cat T Cat Cat Cat T Cat Cat Cat Cat Cat Cat Cat Cat Cat Ca	Date of Disbursement Date of Disbursement Transaction ID: 22993192 Amount of Each Disbursement this Period egory/ ype Memo Item Contribution

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	Detailed Summary Page	27 28a 28b 28c 29 30
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) A. Pete Aguilar For Congress		Date of Disbursement
Mailing Address PO Box 10954		02 / 09 / 2016
,	tate Zip Code CA 92423	Transaction ID: 22994480
Purpose of Disbursement Contribution		011 Amount of Each Disbursement this Period
Candidate Name Rep. Pete Aguilar Office Sought: House Disbursem		ategory/ Type 2000.00 Memo Item
Senate President	Primary General Other (specify) ▼	Contribution
State: CA District: 31 Full Name (Last, First, Middle Initial)		
Brady For Congress		Date of Disbursement
Mailing Address PO Box 8277		02 09 2016
City	toto Zin Codo	1
The Woodlands	tate Zip Code TX 77387	Transaction ID : 22994481
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The Woodlands Purpose of Disbursement Contribution Candidate Name Rep. Kevin Patrick Brady Office Sought: Senate President State: TX District: 08 Full Name (Last, First, Middle Initial) Paul Cook For Congress Mailing Address PO Box 365 City Yucca Valley	ent For: 2016 Primary General	Amount of Each Disbursement this Period ategory/ Type Memo Item Contribution Date of Disbursement
The Woodlands Purpose of Disbursement Contribution Candidate Name Rep. Kevin Patrick Brady Office Sought: House Senate President State: TX District: 08 Full Name (Last, First, Middle Initial) Paul Cook For Congress Mailing Address PO Box 365 City Yucca Valley Purpose of Disbursement Contribution	ent For: 2016 Primary General Other (specify) tate Zip Code CA 92286	Amount of Each Disbursement this Period ategory/ Type Memo Item Contribution Date of Disbursement 02 09 2500.00
The Woodlands Purpose of Disbursement Contribution Candidate Name Rep. Kevin Patrick Brady Office Sought: Senate President State: TX District: 08 Full Name (Last, First, Middle Initial) Paul Cook For Congress Mailing Address PO Box 365 City Yucca Valley Purpose of Disbursement Contribution Candidate Name Rep. Paul Cook	ent For: 2016 Primary General Other (specify) tate Zip Code CA 92286 Ca	Amount of Each Disbursement this Period ategory/ Type Memo Item Contribution Date of Disbursement Date of Disbursement Transaction ID: 22994483
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The Woodlands Purpose of Disbursement Contribution Candidate Name Rep. Kevin Patrick Brady Office Sought: House Senate President State: TX District: 08 Full Name (Last, First, Middle Initial) Paul Cook For Congress Mailing Address PO Box 365 City Yucca Valley Purpose of Disbursement Contribution Candidate Name Rep. Paul Cook Office Sought: House Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Paul Cook Office Sought: House Senate President	ent For: 2016 Primary General Other (specify) tate Zip Code CA 92286 Ca ent For: 2016 Primary General Other (specify) Ca	Amount of Each Disbursement this Period ategory/ Type Date of Disbursement Date of Disbursement Date of Disbursement Transaction ID: 22994483 Amount of Each Disbursement this Period ategory/ Type Memo Item Contribution

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NAME OF COMMITTEE (In Full) American Hospital Association PAC		. , p		
Full Name (Last, First, Middle Initial)				
A. French Hill For Arkansas				Date of Disbursement
Mailing Address PO Box 7841				02 09 2016
•	State Zip Co			Transaction ID : 22994486
Little Rock Purpose of Disbursement	AR 72217	, I		
Contribution			011	Amount of Each Disbursement this Period
Candidate Name			ategory/	1000.00
Rep. French Hill			Type	1000.00
Senate President	nent For: 2016 Primary G Other (specify)	ieneral		Memo Item Contribution
State: AR District: 02				
Full Name (Last, First, Middle Initial)				D
3. Levin For Congress				Date of Disbursement
Mailing Address PO Box 37				02 09 2016
Roseville	State Zip Co MI 48066			Transaction ID : 22994487
Purpose of Disbursement Contribution			011	Amount of Each Disbursement this Period
Candidate Name		C	Category/	
Rep. Sandy M. Levin			Туре	1500.00
Senate	nent For: 2016 Primary ☐ G Other (specify) ▼	ieneral		Memo Item Contribution
Full Name (Last, First, Middle Initial)				
Donald Norcross For Congress				Date of Disbursement
Mailing Address PO Box 160				02 09 / 2016
Collingswood	State Zip Co NJ 08108			Transaction ID: 22994488
Purpose of Disbursement Contribution			011	Amount of Each Disbursement this Period
Candidate Name			Category/	
Rep. Donald Norcross			Type	1000.00
0	nent For: 2016			Memo Item
Senate	Primary G Other (specify) ▼	ieneral		Contribution

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b	one) 22 X 23 24 25 26			
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	>					
Full Name (Last, First, Middle Initial) A. Mark Pocan For Congress			Date of Disbursement			
Mailing Address PO Box 327			02 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City S Madison	tate Zip Code WI 53701		Transaction ID : 22994489			
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period			
Candidate Name Rep. Mark Pocan		Category/ Type	1000.00			
Senate President	nent For: 2016 Primary General Other (specify)		Memo Item Contribution			
State: WI District: 02 Full Name (Last, First, Middle Initial)			Date of Bishamanant			
Mailing Address DO Day 05700			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 25763	tata Zio Cada		02 09 2016			
•	tate Zip Code NM 87125		Transaction ID: 22994490			
2016 Contribution		011	Amount of Each Disbursement this Period			
Candidate Name LOBO PAC		Category/ Type	1000.00			
	nent For: Primary General Other (specify) ▼		Memo Item 2016 Contribution			
Full Name (Last, First, Middle Initial) - New Democrat Coalition Political A	ction Committee		Date of Disbursement			
Mailing Address 700 13th Street N.W., Suite 600			02 09 2016			
	tate Zip Code		Transaction ID : 22994491			
Purpose of Disbursement	DC 20005		Transaction ID: 22994491			
2016 Contribution Candidate Name		011 Category/	Amount of Each Disbursement this Period			
New Democrat Coalition Political A Office Sought: House Disbursem		Туре	5000.00			
Senate	Primary General Other (specify) ▼		Memo Item 2016 Contribution			
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TOTAL This Period (last page this line number only)						

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		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.	
American Hospital Association PAC	,		
Full Name (Last, First, Middle Initial) A. Garamendi For Congress Mailing Address 1050 17th St Nw Ste 590		Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement	
Washington	tate Zip Code DC 20036	Transaction ID : 22994492	
Senate President State: CA District: 03	cent For: 2016 Primary General Other (specify) ▼	O11 Category/ Type Memo Item Contribution	d
Full Name (Last, First, Middle Initial) Friends Of Bill Posey Mailing Address P. O. Box 411486		Date of Disbursement	
,	tate Zip Code FL 32941	Transaction ID : 22994493	
Senate	cent For: 2016 Primary	O11 Category/ Type Memo Item Contribution	d
Contribution Candidate Name Rep. Bill Posey Office Sought: House Disbursem Senate President President Candidate Name Candida	ent For: 2016 Primary General	Category/ Type 1000.00 Memo Item	d
Contribution Candidate Name Rep. Bill Posey Office Sought: Senate President State: FL District: 08 Full Name (Last, First, Middle Initial) C- LaHood For Congress Mailing Address P.O. Box 10735 City Peoria Purpose of Disbursement Contribution Candidate Name Darin LaHood Office Sought: House Senate Disbursement Disbursement Disbursement Disbursement Darin LaHood Office Sought: Disbursement Disbursemen	tate Zip Code IL 61612	Category/ Type Memo Item Contribution Date of Disbursement	
Contribution Candidate Name Rep. Bill Posey Office Sought: Senate President State: FL District: 08 Full Name (Last, First, Middle Initial) C. LaHood For Congress Mailing Address P.O. Box 10735 City Peoria Purpose of Disbursement Contribution Candidate Name Darin LaHood Office Sought: House Senate President Disbursem Senate President	tate Zip Code IL 61612 Calcent For: 2016 Primary General Calcent For: 2016 Primary General Other (specify) General Other (specify)	Category/ Type Memo Item Contribution Date of Disbursement Man / Date / Quite / Qui	

	EMIZED DISBURSEMENTS	Use separate schedule for each category of the	1 (0110011 0111)	y one)
		Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30b
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\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC	;		
۹.	Full Name (Last, First, Middle Initial) Citizens For Rush			Date of Disbursement
	Mailing Address P. O. Box 7292			02 09 2016
	City S Chicago	itate Zip Code IL 60680		Transaction ID: 22994495
	Purpose of Disbursement Contribution Candidate Name Rep. Bobby Lee Rush	ent For: 2016	011 Category/ Type	Amount of Each Disbursement this Period 2500.00
	Senate President State: IL District: 01	Primary General Other (specify) ▼	al	Memo Item Contribution
3.	Full Name (Last, First, Middle Initial) McCollum For Congress Mailing Address P.O. Box 14131			Date of Disbursement 02 09 2016
		tate Zip Code		Transaction ID : 22994496
	,			
	•	MN 55114	011	Amount of Each Disbursement this Period
	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum	MN 55114	011 Category/ Type	Amount of Each Disbursement this Period
	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate Disbursem		Category/ Type	Amount of Each Disbursement this Period
	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President Disbursem	MN 55114 nent For: 2016 Primary Genera	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Э.	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial)	MN 55114 nent For: 2016 Primary Genera	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Э.	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial) Walter Jones Committee Mailing Address PO Box 3962 City S Greenville	MN 55114 nent For: 2016 Primary Genera	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Э.	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial) Walter Jones Committee Mailing Address PO Box 3962 City	MN 55114 ment For: 2016 Primary Genera Other (specify) ▼	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement 02
Э.	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial) Walter Jones Committee Mailing Address PO Box 3962 City Sereenville Purpose of Disbursement Contribution Candidate Name Rep. Walter B. Jones Jr. Office Sought: House Senate President Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Walter B. Jones Jr. Office Sought: Senate President	MN 55114 ment For: 2016 Primary Genera Other (specify) ▼	Category/ Type al O11 Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement 02 09 2016 Transaction ID: 22994497
-	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial) Walter Jones Committee Mailing Address PO Box 3962 City Sereenville Purpose of Disbursement Contribution Candidate Name Rep. Walter B. Jones Jr. Office Sought: House Senate President State: NC District: 03	ment For: 2016 Primary General Other (specify) ▼ State Zip Code NC 27836 Dent For: 2016 Primary General Gen	Category/ Type al O11 Category/ Type al	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
S.	St. Paul Purpose of Disbursement Contribution Candidate Name Rep. Betty McCollum Office Sought: House Senate President State: MN District: 04 Full Name (Last, First, Middle Initial) Walter Jones Committee Mailing Address PO Box 3962 City Sereenville Purpose of Disbursement Contribution Candidate Name Rep. Walter B. Jones Jr. Office Sought: House Senate President Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Walter B. Jones Jr. Office Sought: Senate President	ment For: 2016 Primary General	Category/ Type al O11 Category/ Type al	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement 02

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 55 OF 67
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	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)	o and address of any points	var committee te	consist commissions from each commission.
American Hospital Association PAC			
American Hospital Association 1 Ac	,		
Full Name (Last, First, Middle Initial)			
A. Bob Casey for Senate Inc.			Date of Disbursement
Mailing Address 30 South 15th Street Suite 400			02 09 2016
,	State Zip Code		Transaction ID : 22994499
	PA 19102		Transaction ID . 22994499
Purpose of Disbursement 2018 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. Bob Casey		Туре	1000.00
	nent For: 2018		Memo Item
	Primary General		2018 Contribution
State: PA District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
Friends Of Pat Toomey			Date of Disbursement
Mailing Address 228 S. Washington St., Suite 115			02 09 2016
220 0. Washington St., Suite 113			Q2
,	State Zip Code		Transaction ID : 22994501
7 1107101101	VA 22314		
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispulsement this Penou
Sen. Pat Toomey		Category/ Type	1000.00
	nent For: 2016	1,700	Memo Item
	Primary General		Contribution
President	Other (specify) ▼		
State: PA District:			
Full Name (Last, First, Middle Initial)			
Friends Of Pat Toomey			Date of Disbursement
Matthew Address 200 O. M. H. L. C. C. C. L. L. C.			M M / D D / Y Y Y Y Y
Mailing Address 228 S. Washington St., Suite 115			02 09 2016
City	State Zip Code		ID
Alexandria	VA 22314		Transaction ID: 22994502
Purpose of Disbursement Contribution			
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. Pat Toomey Office Sought: House Disburser	nent For: 2016	Туре	
	Primary General		Memo Item
	Other (specify)		Contribution
State: PA District:	, , , , ,		
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SUBTOTAL of Disbursements This Page (optional)		·····	3000.00
TOTAL This Period (last page this line number only)			

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	Detailed Summary Page	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	>		
Full Name (Last, First, Middle Initial) A. Mike Kelly For Congress			Date of Disbursement
Mailing Address PO Box 476			02 09 / 2016
,	tate Zip Code PA 16045		Transaction ID : 22994503
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Mike Kelly Office Sought: House Disbursem	nent For: 2016	Category/ Type	3000.00
Senate President	Primary General Other (specify) ▼		Memo Item Contribution
State: PA District: 03 Full Name (Last, First, Middle Initial)			
Pat Meehan For Congress			Date of Disbursement
Mailing Address 50 S Providence Road			02 09 2016
City	tate Zip Code		Transaction ID - 00004504
Media	PA 19063		Transaction ID: 22994504
Media Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan	PA 19063	011 Category/ Type	
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate Disbursem	PA 19063	Category/	Amount of Each Disbursement this Period
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Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate President State: PA District: 07 Full Name (Last, First, Middle Initial)	PA 19063 Tent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 500.00 Memo Item Contribution
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: Senate President State: PA District: 07 Full Name (Last, First, Middle Initial) Pat Meehan For Congress Mailing Address 50 S Providence Road City Media	PA 19063 Tent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 500.00 Memo Item Contribution Date of Disbursement
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate President State: PA District: 07 Full Name (Last, First, Middle Initial) Pat Meehan For Congress Mailing Address 50 S Providence Road City Media Purpose of Disbursement Contribution	PA 19063 Tent For: 2016 Primary General Other (specify) tate Zip Code	Category/	Amount of Each Disbursement this Period 500.00 Memo Item Contribution Date of Disbursement 02 09 2016
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: State: PA District: 07 Full Name (Last, First, Middle Initial) Pat Meehan For Congress Mailing Address 50 S Providence Road City Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan	PA 19063 Tent For: 2016 Primary General Other (specify) ▼ State Zip Code PA 19063	Category/ Type	Amount of Each Disbursement this Period 500.00 Memo Item Contribution Date of Disbursement 02
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: State: PA District: 07 Full Name (Last, First, Middle Initial) Pat Meehan For Congress Mailing Address 50 S Providence Road City Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate Disbursement Contribution Disbursement Contribution Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate	PA 19063 Tent For: 2016 Primary General Other (specify) ▼ State Zip Code PA 19063	Category/ Type 011 Category/	Amount of Each Disbursement this Period 500.00 Memo Item Contribution Date of Disbursement 02
Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate President State: PA District: 07 Full Name (Last, First, Middle Initial) Pat Meehan For Congress Mailing Address 50 S Providence Road City Media Purpose of Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Patrick L. Meehan Office Sought: House Senate President	PA 19063 Tent For: 2016 Primary General Other (specify) State Zip Code PA 19063 Tent For: 2016 Primary General Other (specify) Other (specify) Other (specify)	O11 Category/ Type 011 Category/ Type	Amount of Each Disbursement this Period 500.00 Memo Item Contribution Date of Disbursement 02

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	r than using the name a ull)			28a 28b 28c 29 30b on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Bill Shuster For Cone	Initial)			Date of Disbursement
Mailing Address PO Box 27				02 09 7 2016
City Hollidaysburg Purpose of Disbursement Contribution	State PA	'		Transaction ID: 22994506
Candidate Name Rep. William Franklir Office Sought: House Senate Preside	Disbursement Prin	t For: 2016 mary ☐ Genera ner (specify) ▼	O11 Category/ Type	Amount of Each Disbursement this Period 2000.00 Memo Item Contribution
Full Name (Last, First, Middle Michael Burgess For Mailing Address PO Box 2334	r Congress			Date of Disbursement
City Denton Purpose of Disbursement Contribution	State TX		011	Transaction ID: 22999784 Amount of Each Disbursement this Period
Candidate Name Rep. Michael C. Bury Office Sought: House Senate Preside	Disbursement Print Oth		Category/ Type	Memo Item Contribution
Rep. Michael C. Bury Office Sought: House Senate Preside	Disbursement Print Oth 26 Initial) Congress	mary Genera	Type	Memo Item
Rep. Michael C. Burgoffice Sought: House Senate Preside	Disbursement Prin Prin Oth Congress Blvd. Suite 685 State CA Disbursement Prin Oth	mary General G	Type O11 Category/ Type	Memo Item Contribution Date of Disbursement
Rep. Michael C. Burgoffice Sought: House Senate Preside	Disbursement Prin Oth	mary General G	Type O11 Category/ Type	Memo Item Contribution Date of Disbursement 02

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s		•
	for each category of the Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			
Rodney For Congress			Date of Disbursement
Mailing Address PO Box 344			02 17 2016
Taylorville	tate Zip Code IL 62568		Transaction ID : 22999786
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Rodney L. Davis		Category/ Type	2000.00
Senate President	ent For: 2016 Primary General Other (specify)		Memo Item Contribution
State: IL District: 13 Full Name (Last, First, Middle Initial) 3. Dold For Congress			Date of Disbursement
Mailing Address PO Box 6312			02 17 2016
Libertyville	tate Zip Code IL 60048		Transaction ID: 22999787
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name Rep. Bob James Dold Jr.		Category/	2000.00
Office Sought: House Disbursem	ent For: 2016 Primary General Other (specify)	Туре	Memo Item Contribution
Full Name (Last, First, Middle Initial) - Forbes For Congress			Date of Disbursement
Mailing Address PO Box 15100			02 17 2016
•	tate Zip Code VA 23328		Transaction ID: 22999788
Contribution Candidate Name		011	Amount of Each Disbursement this Period
Rep. J. Randy Forbes		Category/ Type	1000.00
Senate X F	ent For: 2016 Primary General Other (specify)		Memo Item Contribution
State: VA District: 02			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	OR LINE NUMBER: PAGE 59 OF 67 check only one) 21b 22 23 24 25 26
	Detailed Summary Page	27 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) A. Kansans For Huelskamp		Date of Disbursement
Mailing Address PO Box 410		02 / 17 / 2016
,	tate Zip Code KS 67844	Transaction ID : 22999789
Purpose of Disbursement Contribution Candidate Name Rep. Tim Huelskamp	Cate	Amount of Each Disbursement this Period egory/ type 1000.00
Senate President State: KS District: 01	ent For: 2016 Primary ☐ General Other (specify) ▼	Memo Item Contribution
Full Name (Last, First, Middle Initial) Friends Of Sam Johnson		Date of Disbursement
Mailing Address P.O. Box 860096		02 17 2016
Plano Purpose of Disbursement	tate Zip Code TX 75086	Transaction ID : 22999790
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson	TX 75086	Amount of Each Disbursement this Period egory/
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: House Senate Disbursem	TX 75086	Amount of Each Disbursement this Period
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Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: House Disbursem	TX 75086 Cate The ent For: 2016 Primary General	Amount of Each Disbursement this Period egory/ iype Memo Item Contribution Date of Disbursement
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: House Senate President State: TX District: 03 Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen Mailing Address P.O. Box 44369 250 Prairie Center Drive City Eden Prairie Purpose of Disbursement Contribution	TX 75086 Cate T ent For: 2016 Primary General Other (specify) tate Zip Code MN 55344	Amount of Each Disbursement this Period egory/ type Memo Item Contribution Date of Disbursement Man Man And And And And Andrew 02 17 2016
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: State: TX District: 03 Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen Mailing Address P.O. Box 44369 250 Prairie Center Drive City Eden Prairie Purpose of Disbursement Contribution Candidate Name Rep. Erik P. Paulsen	ent For: 2016 Primary General Other (specify) tate Zip Code MN 55344	Amount of Each Disbursement this Period egory/ ype Memo Item Contribution Date of Disbursement Man Man / Date / Yangaran 02 17 2016 Transaction ID: 22999791
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: House Disbursement	ent For: 2016 Primary General Other (specify) tate Zip Code MN 55344	Amount of Each Disbursement this Period egory/ lype Memo Item Contribution Date of Disbursement Man Man / Date / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Plano Purpose of Disbursement Contribution Candidate Name Rep. Sam Robert Johnson Office Sought: House Senate President State: TX District: 03 Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen Mailing Address P.O. Box 44369 250 Prairie Center Drive City Eden Prairie Purpose of Disbursement Contribution Candidate Name Rep. Erik P. Paulsen Office Sought: House Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Erik P. Paulsen Office Sought: House Senate President	ent For: 2016 Primary General Other (specify) tate Zip Code MN 55344 Cate The code MN 55344 Cate The code Cate The code Cate The code Code Code The code Code Code Code Code Code Code Code C	Amount of Each Disbursement this Period egory/ lype Memo Item

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or for commercial purposes, other than using the nam	ne and address of any politic	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC	<u> </u>		
Full Name (Last, First, Middle Initial)			
A. Kurt Schrader For Congress			Date of Disbursement
Mailing Address PO Box 3314			02 17 2016
,	State Zip Code		Transaction ID : 22999792
Oregon City Purpose of Disbursement	OR 97045		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Kurt Schrader		Type	1000.00
Senate	nent For: 2016 Primary General Other (specify) ▼		Memo Item Contribution
State: OR District: 05			
Full Name (Last, First, Middle Initial)			
Pete Sessions For Congress			Date of Disbursement
Mailing Address PO Box 823047			02 17 2016
Dallas	State Zip Code TX 75382		Transaction ID : 22999793
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Pete Sessions		Type	4000.00
Office Sought: House Disbursem	nent For: 2016 Primary General Other (specify)		Memo Item Contribution
State: TX District: 32			
Full Name (Last, First, Middle Initial)			Data of Dishurranes
Swalwell For Congress			Date of Disbursement
Mailing Address P.O. Box 2847			02 17 2016
City	State Zip Code		Tunnel aller ID 00000000
Dublin	CA 94568		Transaction ID: 22999794
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Eric M. Swalwell		Type	1000.00
Senate	nent For: 2016 Primary General Other (specify)		Memo Item Contribution
State: CA District: 15	(opoon)/ ♥		
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) A. CBC PAC: Congressional Black Ca	ucus PAC		Date of Disbursement
Mailing Address 509 C Street NE			02 17 2016
,	tate Zip Code		Transaction ID : 22999795
Washington Purpose of Disbursement	DC 20002		
2016 Contribution		011	Amount of Each Disbursement this Period
Candidate Name	DAG	Category/	1000.00
CBC PAC: Congressional Black Ca Office Sought: House Disburser		Туре	
Senate President	Primary General Other (specify) ▼		Memo Item 2016 Contribution
State: District:			
Full Name (Last, First, Middle Initial) 3. Denali Leadership PAC			Date of Disbursement
Mailing Address 16158 Essex Park Dr.			02 17 2016
,	tate Zip Code AK 99516		Transaction ID : 22999796
Anchorage Purpose of Disbursement	AK 99516		
2016 Contribution		011	Amount of Each Disbursement this Period
Candidate Name	C	Category/	3000.00
Candidate Name Denali Leadership PAC Office Sought: House Disburser		Category/ Type	
Denali Leadership PAC Office Sought: House Disbursem Senate	ent For: Primary General		3000.00 Memo Item 2016 Contribution
Denali Leadership PAC Office Sought: House Disbursem Senate	ent For:		Memo Item
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ent For: Primary General		Memo Item 2016 Contribution
Denali Leadership PAC Office Sought: House Disbursem Senate President State: District:	ent For: Primary General		Memo Item
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Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City	nent For: Primary		Memo Item 2016 Contribution Date of Disbursement
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Minneapolis Purpose of Disbursement	nent For: Primary	Type	Memo Item 2016 Contribution Date of Disbursement 02 17 2016
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Minneapolis Purpose of Disbursement 2016 Contribution	ent For: Primary General Other (specify) state Zip Code MN 55414	Type O11	Memo Item 2016 Contribution Date of Disbursement 02 17 2016
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Minneapolis Purpose of Disbursement	ent For: Primary General Other (specify) state Zip Code MN 55414	O11 Category/	Memo Item 2016 Contribution Date of Disbursement 02
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Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Purpose of Disbursement 2016 Contribution Candidate Name Follow the North Star Fund Office Sought: House Senate	ent For: Primary General Other (specify) State Zip Code MN 55414 Conent For: Primary General	O11 Category/	Memo Item 2016 Contribution Date of Disbursement M M M / D D / Y Y Y Y Y 02 17 2016 Transaction ID : 22999797 Amount of Each Disbursement this Period 1000.00
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Purpose of Disbursement 2016 Contribution Candidate Name Follow the North Star Fund Office Sought: House Senate	ent For: Primary General Other (specify) itate Zip Code VN 55414 Comment For:	O11 Category/	Memo Item 2016 Contribution Date of Disbursement 02 17 2016 Transaction ID: 22999797 Amount of Each Disbursement this Period 1000.00 Memo Item
Denali Leadership PAC Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Follow the North Star Fund Mailing Address 316 E Hennepin Ave Suite 201 City Simple Minneapolis Purpose of Disbursement 2016 Contribution Candidate Name Follow the North Star Fund Office Sought: House Senate President	nent For: Primary	O11 Category/ Type	Memo Item 2016 Contribution Date of Disbursement 02

SCHEDULE B (FEC Form 3X)		FOR LINE	
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NAME OF COMMITTEE (In Full)	c and address of any point	our committee to	conditional from Such Committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			
Lone Star Leadership PAC			Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East			02 17 2016
	State Zip Code		Transaction ID : 22999798
	MD 20814		1141134341011 ID . 22333733
Purpose of Disbursement 2016 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Lone Star Leadership PAC	ant Fam	Type	1000.00
President	nent For: Primary General Other (specify)		Memo Item 2016 Contribution
State: District:			
Full Name (Last, First, Middle Initial) Huffman For Congress 2014			Date of Disbursement
Mailing Address P.O. Box 151563			02 17 2016
,	State Zip Code CA 94915		Transaction ID: 23000098
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Biobarcomont this Foliot
Rep. Jared Huffman		Category/ Type	1000.00
•	nent For: 2016	71	Memo Item
Senate	Primary General		Contribution
President State: CA District: 02	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
Price For Congress			Date of Disbursement
Thee For Congress			M M / D D / Y Y Y Y
Mailing Address P.O. Box 425			02 17 2016
City	State Zip Code		Transaction ID - 22000000
	GA 30077		Transaction ID: 23000099
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Thomas Edmunds Price M.D.		Type	1000.00
Senate	nent For: 2016 Primary General		Memo Item Contribution
State: GA District: 06	Other (specify) ▼		
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	Detailed Summary Page	27	28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Hospital Association PAC	;		
Full Name (Last, First, Middle Initial) Gutierrez For Congress			Date of Disbursement
Mailing Address 5310 W. Cullom Ave.			02 17 2016
Chicago	tate Zip Code IL 60641		Transaction ID : 23000100
Purpose of Disbursement Contribution Candidate Name	[011 Category/	Amount of Each Disbursement this Period
Senate	ent For: 2016 Primary General Other (specify) ▼	Type	1000.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) 3. Quigley For Congress			Date of Disbursement
Mailing Address 2652 N Southport Avenue Unit E			02 17 2016
City	tate Zip Code		Transaction ID: 23000101
Chicago	IL 60614		11a115aCt1011 1D . 23000 101
•	IL 60614	011	Amount of Each Disbursement this Period
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate Disbursem	IL 60614	011 Category/ Type	
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President Disbursem	ent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President State: IL District: 05 Full Name (Last, First, Middle Initial)	ent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President State: IL District: 05 Full Name (Last, First, Middle Initial) C. Schakowsky For Congress Mailing Address P.O. Box 5130 City Evanston	ent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President State: IL District: 05 Full Name (Last, First, Middle Initial) C. Schakowsky For Congress Mailing Address P.O. Box 5130	IL 60614 Pent For: 2016 Primary General Other (specify) ▼ tate Zip Code IL 60204	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: Senate President State: IL District: 05 Full Name (Last, First, Middle Initial) C. Schakowsky For Congress Mailing Address P.O. Box 5130 City Evanston Purpose of Disbursement Contribution Candidate Name Rep. Jan D. Schakowsky	IL 60614 Pent For: 2016 Primary General Other (specify) ▼ tate Zip Code IL 60204	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President State: IL District: 05 Full Name (Last, First, Middle Initial) Cochakowsky For Congress Mailing Address P.O. Box 5130 City Evanston Purpose of Disbursement Contribution Candidate Name Rep. Jan D. Schakowsky Office Sought: House Senate Disbursement Columnation Disbursement Contribution Candidate Name Rep. Jan D. Schakowsky Disbursement Senate	ent For: 2016 Primary General Other (specify) tate Zip Code IL 60204	Category/ Type 011 Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Chicago Purpose of Disbursement Contribution Candidate Name Rep. Michael Quigley Office Sought: House Senate President State: IL District: 05 Full Name (Last, First, Middle Initial) C-Schakowsky For Congress Mailing Address P.O. Box 5130 City Evanston Purpose of Disbursement Contribution Candidate Name Rep. Jan D. Schakowsky Office Sought: House Senate President Disbursement Contribution Disbursement Contribution Candidate Name Rep. Jan D. Schakowsky Office Sought: House Senate President	ent For: 2016 Primary General Other (specify) tate Zip Code IL 60204 Tent For: 2016 Primary General Other (specify) Other (specify)	Category/ Type 011 Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Volunteers For Shimkus			Date of Disbursement
Mailing Address PO Box 661			02 17 2016
Collinsville	state Zip Code IL 62234		Transaction ID : 23000105
Senate	nent For: 2016 Primary General Other (specify)	011 Category/ Type	Amount of Each Disbursement this Period 1500.00 Memo Item Contribution
State: IL District: 15 Full Name (Last, First, Middle Initial) 3. Paul Tonko For Congress			Date of Disbursement
Mailing Address 911 Central Avenue # 221			02 17 2016
City	toto 7:- Ocide		
Albany	State Zip Code NY 12206		Transaction ID: 23000106
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Disbursement		011 Category/ Type	Transaction ID : 23000106 Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate Disbursem	NY 12206 nent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	NY 12206 nent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial) C. Dr Brian Babin For Congress Mailing Address PO Box 159 City Woodville	NY 12206 nent For: 2016 Primary General	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial) C. Dr Brian Babin For Congress Mailing Address PO Box 159 City	NY 12206 nent For: 2016 Primary General Other (specify) ▼	Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial) C. Dr Brian Babin For Congress Mailing Address PO Box 159 City Woodville Purpose of Disbursement Contribution Candidate Name Rep. Brian Babin Office Sought: House Senate Disbursement Disbursement Contribution Disbursement Contribution Disbursement Condidate Name Rep. Brian Babin Office Sought: House Senate	NY 12206 nent For: 2016 Primary General Other (specify) ▼	Category/ Type 011 Category/	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Albany Purpose of Disbursement Contribution Candidate Name Rep. Paul David Tonko Office Sought: House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial) C- Dr Brian Babin For Congress Mailing Address PO Box 159 City Woodville Purpose of Disbursement Contribution Candidate Name Rep. Brian Babin Office Sought: House Senate President Disbursement Contribution Disbursement Contribution	NY 12206 Primary General Other (specify) ▼ State Zip Code TX 75979 Inent For: 2016 Primary General Other (specify) ▼	Category/ Type 011 Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item Contribution Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 OF 67 (check only one) 21b 22 X 23 24 25 26 27 28a 28b 28c 29 30l
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American Hospital Association PAC	e and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Culberson For Congress Mailing Address PO Box 41964	Date of Disbursement 02 17 2016	
Houston Purpose of Disbursement Contribution Candidate Name Rep. John Abney Culberson Office Sought: House Senate Disbursem	ent For: 2016 Primary General Other (specify)	Transaction ID : 23000108 Amount of Each Disbursement this Period Category/ Type Memo Item Contribution
•	tate Zip Code	Date of Disbursement 02
Purpose of Disbursement Contribution Candidate Name Rep. Blake Farenthold Office Sought: House Senate Disbursem	ent For: 2016 Primary General Other (specify)	O11 Category/ Type Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) McCaul For Congress, Inc Mailing Address 815-A Brazos St		Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
Austin Purpose of Disbursement Contribution Candidate Name Rep. Michael T. McCaul Office Sought: House Senate Disbursem	tate Zip Code TX 78701 Colorent For: 2016 Primary General Other (specify) Table 1 Colorent For: 2016	Transaction ID : 23000110 Amount of Each Disbursement this Period Category/ Type Memo Item Contribution
SUBTOTAL of Disbursements This Page (optional)		4000.00
TOTAL This Period (last page this line number only).		

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
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A. Poe For Congress Mailing Address P.O. Box 14222			Date of Disbursement O2 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Humble Purpose of Disbursement Contribution Candidate Name Rep. Ted Poe Office Sought: House Senate Disbursement Senate	tate Zip Code TX 77347 ent For: 2016 Primary General Other (specify)	011 Category/ Type	Transaction ID : 23000111 Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) B. Marc Veasey Congressional Campa Mailing Address PO Box 50084		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Fort Worth Purpose of Disbursement Contribution Candidate Name Rep. Marc Veasey Office Sought: House Senate Disbursement Senate	tate Zip Code TX 76105 ent For: 2016 Primary General Other (specify)	011 Category/ Type	Transaction ID : 23000112 Amount of Each Disbursement this Period 1000.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) C. Mailing Address City St	tate Zip Code		Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate President C		Category/ Type	Amount of Each Disbursement this Period Memo Item
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			2000.00 85000.00

Ms. Melinda Hatton

Signature

	HEDULE E (FEC Form 3X)		
TE	MIZED INDEPENDENT EXPENDITURES		PAGE 67 OF 67 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
A	merican Hospital Association PAC		C C00106146
Che	eck if 24-hour report 48-hour report New r	report Amends repo	ort filed on
	Full Name of Payee Mentzer Media Services, Inc.	☐ Memo It	M M / D D / Y Y Y Y
	Mailing Address 210 W Pennsylvania Ave.		02 29 2016 Amount
	Suite 250		Allount
	City State Towson MD	Zip Code 21204	Transaction ID : 23009905 Date of Disbursement or Obligation
İ	Purpose of Expenditure Digital Advertising	Category/ Type 004	02 / 26 / 2016
ŀ	Name of Federal Candidate	X Support	Office Sought: X House District: 08
	Rep. Kevin Patrick Brady	Oppose	President Senate State: TX
	Calendar Year-To-Date Per Election for Office Sought	6500.00	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
ľ	Full Name of Payee	☐ Memo Ite	Date of Public Distribution/Dissemination
	McCarthy Hennings Whalen, Inc.		02 29 2016
	Mailing Address 1850 M Street, NW		Amount
	Suite 235 City State	Zip Code	840.00
	Washington DC	20036	Transaction ID : 23021836 Date of Disbursement or Obligation
	Purpose of Expenditure Digital Production	Category/ Type 004	02 / 29 / 2016
ľ	Name of Federal Candidate	Support	Office Sought: House District:08
	Rep. Kevin Patrick Brady	Oppose	President Senate State: TX
	Calendar Year-To-Date Per Election for Office Sought	7340.00	Disbursement For:
((a) SUBTOTAL of Itemized Independent Expenditures		7340.00
((b) SUBTOTAL of Unitemized Independent Expenditures		. •
((c) TOTAL Independent Expenditures		7340.00
١	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorized committee) any political party committee or its agent.		

[Electronically Filed]

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Date